STEP 1

Grievance Form

This form is to be used by the employee in filing a formal grievance. The form will be filled in completely and will service, without amendment, as the source document for the grievance process. All supporting documentation must be attached to this grievance form.

Employee's Name Immediate Supervisor's Name		Job Title Employee's Work Location
	der for a formal grievance to be processed, the ional pages if needed):	e following four elements must be addressed (attach
(1)	What was the date of occurrence and what procedure occurred which you consider cor	specific behavior, condition, or violation of policy or nstitutes a grievance?
(2)	How have you been adversely affected by t	the grievance situation?
(3)	What specific action have you taken to reco with your immediate supervisor? What has	oncile and improve this situation, including discussing it been the outcome of these efforts?
(4)	What specific remedy do you request?	
Emp	loyee's Signature	Date